



## GROUP VOLUNTARY STD

### TWO PLAN DESIGNS TO CHOOSE FROM:

<u>Benefits Begin</u>		<u>Maximum Duration</u>
<u>Accident</u> 8 <sup>th</sup> day	<u>Sickness</u> 8 <sup>th</sup> day	26 weeks
<b>OR</b>		
15 <sup>th</sup> day	15 <sup>th</sup> day	26 weeks

### COVERAGES:

This Voluntary Short Term Disability Income Program pays benefits for covered non-occupational injuries and illnesses. Maternity, alcoholism, drug addiction and mental/nervous conditions are covered the same as any other illness. A **partial disability** benefit is included to support a recovering employee's return to part-time employment following a period of disability for which a benefit was paid. The short term disability benefits are paid independent of any sick leave and short term disability benefits are not subject to Federal, State, or Social Security taxes.

### EMPLOYEE ELIGIBILITY:

Employees meeting all of the following are eligible for coverage to be effective on the 1<sup>st</sup> day of the calendar month following 30 days employment:

- Full-time employment (working 20 or more hours weekly)
- Actively at work on the effective date of coverage
- Employees pay 100% of the premium

### PRE-EXISTING CONDITIONS:

A pre-existing condition is a condition with treatment (or symptoms for which an ordinarily prudent person would seek treatment) within 12 months prior to the effective date. A pre-existing condition will not be covered in the first 12 months after the effective date.

### PARTIAL DISABILITY BENEFIT:

If a partially disabled employee returns to work on a part-time basis during a period of disability for which Short Term Disability Benefits for total disability have been paid, a Partial Disability Benefit may be paid. Eligibility for such benefit will be defined in the Master Policy. The Partial Disability Benefit will be an amount equal to the employee's full Short Term Disability Benefit less 50% of the employee's part-time wages.

**A \$10,000 ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) BENEFIT IS AUTOMATICALLY INCLUDED FOR ALL PARTICIPANTS.**



Arkansas State University has agreed to offer valuable Voluntary Short Term Disability to you through payroll deduction. Voluntary Short Term Disability protects your income in case of disability due to sickness or accident outside the workplace. Please review the chart below and choose a weekly benefit maximum to suit your needs. You may choose a benefit up to \$600 not to exceed a maximum of 66 2/3% of your salary.

<b>Monthly Cost (needs to be converted to per pay check cost)</b>										
<b>Age Category</b>	<b>Weekly Benefit</b>									
	<b>\$150</b>	<b>\$200</b>	<b>\$250</b>	<b>\$300</b>	<b>\$350</b>	<b>\$400</b>	<b>\$450</b>	<b>\$500</b>	<b>\$550</b>	<b>\$600</b>
< 30	11.10	14.80	18.50	22.20	25.90	29.60	33.30	37.00	40.70	44.40
30 - 34	11.70	15.60	19.50	23.40	27.30	31.20	35.10	39.00	42.90	46.80
35 - 39	11.70	15.60	19.50	23.40	27.30	31.20	35.10	39.00	42.90	46.80
40 - 44	11.70	15.60	19.50	23.40	27.30	31.20	35.10	39.00	42.90	46.80
45 - 49	13.35	17.80	22.25	26.70	31.15	35.60	40.05	44.50	48.95	53.40
50 - 54	15.90	21.20	26.50	31.80	37.10	42.40	47.70	53.00	58.30	63.60
55 - 59	18.75	25.00	31.25	37.50	43.75	50.00	56.25	62.50	68.75	75.00
60 - 64	22.05	29.40	36.75	44.10	51.45	58.80	66.15	73.50	80.85	88.20
65 - 69	29.10	38.80	48.50	58.20	67.90	77.60	87.30	97.00	106.70	116.40
70 - 74	39.45	52.60	65.75	78.90	92.05	105.20	118.35	131.50	144.65	157.80
75 +	49.20	65.60	82.00	98.40	114.80	131.20	147.60	164.00	180.40	196.80

**Benefits Begin on:**

**Accident or Sickness**

**Day 8**

**Benefit Duration**

**Up to 26 weeks**

Benefit duration determined by nature of disability

Maternity, alcoholism or drug addiction and mental/nervous conditions are covered in the same manner as an other illness.

**Pre-existing conditions:** A condition that existed in the 12 months prior to the effective date will not be covered in the first 12 months of coverage. A pre-existing condition is a condition with treatment (or symptoms for which an ordinarily prudent person would seek treatment) within 12 months prior to the effective date.

A \$10,000 Accidental Death and Dismemberment (AD&D) benefit is automatically included for all participants.



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< 30	9.60	12.80	16.00	19.20	22.40	25.60	28.80	32.00	35.20	38.40
30 - 34	10.05	13.40	16.75	20.10	23.45	26.80	30.15	33.50	36.85	40.20
35 - 39	10.05	13.40	16.75	20.10	23.45	26.80	30.15	33.50	36.85	40.20
40 - 44	10.05	13.40	16.75	20.10	23.45	26.80	30.15	33.50	36.85	40.20
45 - 49	11.55	15.40	19.25	23.10	26.95	30.80	34.65	38.50	42.35	46.20
50 - 54	13.80	18.40	23.00	27.60	32.20	36.80	41.40	46.00	50.60	55.20
55 - 59	16.35	21.80	27.25	32.70	38.15	43.60	49.05	54.50	59.95	65.40
60 - 64	19.05	25.40	31.75	38.10	44.45	50.80	57.15	63.50	69.85	76.20
65 - 69	25.20	33.60	42.00	50.40	58.80	67.20	75.60	84.00	92.40	100.80
70 - 74	34.20	45.60	57.00	68.40	79.80	91.20	102.60	114.00	125.40	136.80
75 +	42.60	56.80	71.00	85.20	99.40	113.60	127.80	142.00	156.20	170.40

**Benefits Begin on:**  
**Accident or Sickness Day 15**

**Benefit Duration Up to 26 weeks**  
 Benefit duration determined by nature of disability

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